

IAP2 Rec'd PCT/PTO 29 SEP 2006

**APPLICATION DATA SHEET****Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Title:: QUINOLONE CARBOXYLIC ACID DERIVATIVES  
FOR TREATMENT OF HYPERPROLIFERATIVE  
CONDITIONS  
  
Attorney Docket Number:: 5196

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Uday  
Middle Name::  
Family Name:: KHIRE  
City of Residence:: Orange  
State or Province of Residence:: CT  
Country of Residence:: US  
Street of mailing address:: 411 Ridge Road  
City of mailing address:: Orange  
State or Province of mailing address:: CT  
Country of Mailing address:: US  
Postal or Zip Code of mailing address:: 06477

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Xiao-Gao  
Middle Name::  
Family Name:: LIU  
City of Residence:: New Haven

State or Province of Residence:: CT  
Country of Residence:: US  
Street of mailing Address: 576 Central Avenue, 1A  
City of mailing Address:: New Haven  
State or Province of mailing address:: CT  
Country of Mailing address:: US  
Postal or Zip Code of mailing address:: 06515

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Dhanapalan  
Middle Name::  
Family Name:: NAGARATHNAM  
City of Residence:: Bethany  
State or Province of Residence:: CT  
Country of Residence:: US  
Street of mailing address:: 52 Virginia Rail Drive  
City of mailing address:: Bethany  
State or Province of mailing address:: CT  
Country of Mailing address:: US  
Postal or Zip Code of mailing address:: 06524

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jill  
Middle Name::  
Family Name:: Wood  
City of Residence:: North Haven  
State or Province of Residence:: CT  
Country of Residence:: US  
Street of mailing address:: 3007 Ridge Road  
City of mailing address:: North Haven  
State or Province of mailing address:: CT

Country of Mailing address:: US  
Postal or Zip Code of mailing address:: 06473

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: China  
Status:: Full Capacity  
Given Name:: Lei  
Middle Name::  
Family Name:: WANG  
City of Residence:: New Haven  
State or Province of Residence:: CT  
Country of Residence:: US  
Street of mailing address:: 129 York Street, Apt. 8A  
City of mailing address:: New Haven  
State or Province of mailing address:: CT  
Country of Mailing address:: US  
Postal or Zip Code of mailing address:: 06511

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: China  
Status:: Full Capacity  
Given Name:: Donglei  
Middle Name::  
Family Name:: LIU  
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State or Province of Residence:: CT  
Country of Residence:: US  
Street of mailing address:: 11 Bassett Street, Apt. D9  
City of mailing address:: West Haven  
State or Province of mailing address:: CT  
Country of Mailing address:: US  
Postal or Zip Code of mailing address:: 06516

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: China

Status:: Full Capacity  
Given Name:: Jin  
Middle Name::  
Family Name:: ZHAO  
City of Residence:: Middletown  
State or Province of Residence:: CT  
Country of Residence:: US  
Street of mailing address:: 333 Town Colony Drive  
City of mailing address:: Middletown  
State or Province of mailing address:: CT  
Country of Mailing address:: US  
Postal or Zip Code of mailing address:: 06457

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Leatte  
Middle Name::  
Family Name:: GUERNON  
City of Residence:: Hamden  
State or Province of Residence:: CT  
Country of Residence:: US  
Street of mailing address:: 270 Magee Drive  
City of mailing address:: Hamden  
State or Province of mailing address:: CT  
Country of Mailing address:: US  
Postal or Zip Code of mailing address:: 06514

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: China  
Status:: Full Capacity  
Given Name:: Lei  
Middle Name::  
Family Name:: ZHANG  
City of Residence:: Hamden

State or Province of Residence:: CT  
Country of Residence:: US  
Street of mailing address:: 45 Tanglewood Drive  
City of mailing address:: Hamden  
State or Province of mailing address:: CT  
Country of Mailing address:: US  
Postal or Zip Code of mailing address:: 06518

**Correspondence Information**

Correspondence Customer Number:: 35969

**Representative Information**

Representative Customer Number:: 35969

**Domestic Priority Information**

| Application::    | Continuity Type::                    | Parent Application:: | Parent Filing Date:: |
|------------------|--------------------------------------|----------------------|----------------------|
| This application | National Stage of                    | PCT/US05/010999      | 31 March 2005        |
| PCT/US05/010999  | Claiming benefit under 35 USC 119(e) | 60/558,432           | 31 March 2004        |

**Foreign Priority Information**

| Country:: | Application number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
|           |                      |               |                    |

**Assignee Information**

Assignee name: Bayer Pharmaceuticals Corporation  
Street of mailing address: 400 Morgan Lane  
City of mailing address: West Haven  
State or Province of mailing address: CT  
Country of mailing address: US  
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